

Provider Type 48 Home and Community Based Waiver for the Frail Elderly
Reimbursement Rates

Updated: October 14, 2010

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Procedure Code	Description	Mod	Rate
S5100	ADULT DAYCARE SERVICES 15MIN		1.67
S5102	ADULT DAY CARE PER DIEM		40.00
S5120	CHORE SERVICES PER 15 MIN		3.75
S5130	HOMAKER SERVICE NOS PER 15M		3.75
S5135	ADULT COMPANIONCARE PER 15M		2.00
S5150	UNSKILLED RESPITE CARE /15M		2.50
S5151	UNSKILLED RESPITECARE /DIEM		65.00
S5160	EMER RESPONSE SYS INSTAL&TST		45.00
S5161	EMER RSPNS SYS SERV PERMONTH		40.00
T1016	CASE MANAGEMENT - Private Entity		15.84
T1016	CASE MANAGEMENT - Public Entity		25.75